

DO/EC BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER:	09 / 763529	RECEIPT DATE:	02 / 20 / 01
IA NUMBER:	PCT/ KR99 / 00690	IA FILING DATE:	11 / 17 / 99
FAMILY NAME:	RHEE	DELAN WAIVED (Y/N):	Y
GIVEN NAME:	HYOUNG SHAN	DEMAND RECEIVED (Y/N):	N
PRIORITY CLAIMED (Y/N):	Y	PRIORITY DATE:	17 / 19 / 99
NO BASIC FEE (Y/N):	N	US DESIGNATED ONLY (Y/N):	N
ATTORNEY DOCKET NUMBER:	2048-G-02	COUNTRY:	
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APPLICATION TITLES:

METHOD AND DEVICE FOR GENERATING VOICE TEXT IMAGE COMMERCIAL INFORMATI
ON RINBACK TONE DURING COMMUNICATION WAIT

TAB TO LAST POSITION, PLEASE SEND



Commissioner for Patents
Washington, DC 20231
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CONFIRMATION NO. 8773

Bib Data Sheet

SERIAL NUMBER 09/763,589	FILING DATE 02/23/2001 RULE	CLASS 379	GROUP ART UNIT 2643	ATTORNEY DOCKET NO. 2048-3-02
APPLICANTS Hyoung Chan Rhee, SEOUL, KOREA, REPUBLIC OF; Jong SU Hong, Kyunggi-Do, KOREA, REPUBLIC OF;				
** CONTINUING DATA ***** This application is a 371 of PCT/KR99/00690 11/17/1999. <i>Yes BQT</i>				
** FOREIGN APPLICATIONS ***** REPUBLIC OF KOREA 1999-29153 07/19/1999. <i>Yes BQT</i> REPUBLIC OF KOREA 1999-33113 08/12/1999 REPUBLIC OF KOREA 1999-41268 09/27/1999				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>Barry D. Ten</i> Examiner's Signature Initials		STATE OR COUNTRY KOREA, REPUBLIC OF	SHEETS DRAWING 21	TOTAL CLAIMS 19
INDEPENDENT CLAIMS 2				
ADDRESS Lee & Hong 221 North Figueroa Street 11th Floor Los Angeles, CA 90012				
TITLE Method and device for generating voice/text/image commercial information ringback tone during communication wait				
FILING FEE RECEIVED 500	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	